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TO: U.S. Patent and Trademark Office

TELEFAX #: (703) 872-9306

ATTENTION: Examiner Huynh

DATE: July 21, 2004

TIME: 4:55 p.m.

NUMBER OF PAGES: 8 total page(s) (including this cover)

FROM: Rochelle Lieberman, Esq.

RE: Serial No. 09/753,062

DESCRIPTION: Response to Second Office Action

COMMENT:

Voice Confirmation Required:☐**Yes**☒**No****Original to Follow by Mail/Courier:**☐**Yes**☒**No**

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OFFICIAL 002**CERTIFICATION OF TRANSMISSION**

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Rochelle Lieberman
Rochelle Lieberman

PATENT
Atty. Docket No.: BEA920000013US1

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: **McKenney et al.**

SERIAL NO.: **09/753,062**

Group Art Unit: **2189**

FILING DATE: **December 28, 2000**

Examiner: **Huynh, K.**

FOR: **Quad Aware Locking
Primitive**

AMENDMENT TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
Mail Stop: Non-Fee Amendment

Sir:

Enclosed is an amendment in the above-identified patent application.

☐ ☐ verified statement(s) claiming small entity status

☐ are also enclosed ☐ was submitted previously.

☐ A Petition for Extension of Time is also enclosed.

☐ An Associate Power of Attorney is also enclosed.

☒ No additional fee is required.

☐ An additional fee is required, and is calculated as shown below:

FEE CALCULATION TABLE					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims	31	MINUS 31 =	0	x \$18 =	\$0
Independent Claims	3	MINUS 3 =	0	x \$86 =	\$0
If Amendment adds multiple dependent claims, add \$220.00					
Patent Extension Fee Under 37 C.F.R. §1.136(a) for ___ Months					N/A
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					\$0

☐ A Credit Card Payment Form in the amount of \$___ is enclosed.

☐ Charge \$_____ to Deposit Account No.

Respectfully submitted,

By:



Rochelle Lieberman
Registration No. 39,276
Attorney for Applicant

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